#### **BACKGROUND & SUMMARY INFORMATION**

NAME Kevin Patrick Walter
STREET ADDRESS 6289 Ross Bend
CITY Dublin STATE OH ZIP CODE 43016
OFFICE SOUGHT Dublin City Council At-Large
NAME OF TREASURER KP Walter
TYPE OF REPORT
32 DAYS PRIOR TO ELECTION
X 11 DAYS PRIOR TO ELECTION
38 DAYS FOLLOWING ELECTION
Cumulative total of all contributions received, from campaign start through current report date  (from Statement of Contributions Received total)  \$\frac{5,570.00}{\}\$  Cumulative value of all in-kind contributions received, from campaign start through current report date  (from Statement of In-Kind Contributions Received total)  \$\frac{0}{\}\$
Cumulative total of all expenditures made, from campaign start through current report date (from Statement of Expenditures total)  CLERK OF COUNCIL CITY OF DUBLIN

#### **SIGNATURE**

By signing below, I swear or affirm that this statement and any additional attachments have been prepared or carefully reviewed by me, and constitute my complete, truthful and correct disclosure of all required information.

Name:	Kevin Patrick Walter
Date: .	10/23/15
Signat	ure:

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Page	1

Prescribed by Secretary of State 3/05

Name of Committee in Full				THE STATE OF THE S			
Walter4Dublin							
Full Name of Contributor			Registro	tion Num	her if DA	Ċ	
Barbara Kadunc			Rogistro	uon rum	oo., n 1 21		
Street Address	Employer/Occur	pation/Labor Organization*	_			Form (Cash, Check	c etc )
PO Box 1226		Julius Lucos or Balliandon				Check	ι, οιο.)
City	State	Zip Code	М	D	Y	Amount	
Dublin	OIH	43017	0 6		1   5		75.00
Full Name of Contributor		10017		tion Num		C	75.00
Christina Heinlen					,		
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check	c etc.)
6440 Green Stone Loop	' ' '	•				Credit Ca	
City	State	Zip Code	М	D	Y	Amount	irci
Dublin	$O \mid H$	43016	0 7	2 2	1   5	i	100.00
Full Name of Contributor		20020		tion Num			100.00
Lisa Judson			1				
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check	k, etc.)
8018 Summerhouse Dr. W	1					Credit Ca	ard
City	State	Zip Code	М	D	Y	Amount	
Dublin	OH	43016	0 7	2   2	1   5		100.00
Full Name of Contributor			Registra	tion Num	The Real Property lies	С	
Peter L Coratola Sr.							
Street Address	Employer/Occur	pation/Labor Organization*	_			Form (Cash, Check	k, etc.)
8330 Strasbourg Ct						Check	
City	State	Zip Code	M	D	Y	Amount	
Dublin	OH	43017	0 7	2 0	1 5		250.00
Full Name of Contributor			Registra	tion Num	ber, if PA	С	
Nicoletta Leib							
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Checl	k, etc.)
8564 Crail Ct						Check	
City	State	Zip Code	М	D	Y	Amount	
Dublin	ОН	43017	0 7	1 2	1 5		100.00
Full Name of Contributor			Registra	tion Num	ber, if PA	С	
Howard Baulch							
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check	
6168 Inverurie Dr E		<b>1</b>				Credit Ca	ırd
City	State	Zip Code	M	D	Y	Amount	•••
Dublin	OH	43017		2 3			250.00
Full Name of Contributor			Registra	tion Num	ber, if PA	C	
Mark Mace	[F1(0	pation/Labor Organization*				F (0 1 01 1	
Street Address	Employer/Occup	banon/Labor Organization*				Form (Cash, Check	-
6469 Greenstone Loop City	State	Z:- Code	1.16	l b	T v	Credit Ca	ird
• B		Zip Code	M	D	Y	Amount	75.00
Dublin Full Name of Contributor	() H	43016	0 7	2 4	1 5	C	75.00
David Grimm			Kegistra	MUH NUM	oci, ii PA	·C	
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Checl	k ato
8148 Grafton End	Zanpioyea/Occup	omion puodi Oiganizandii				Credit Ca	
City	State	Zip Code	М	D	Y	Amount Ca	шu
Dublin	O   H	43016	$\begin{vmatrix} \mathbf{n} \\ 1 \end{vmatrix} 0$	1 8	I .		100.00
Dubini	U 11	45010	1110	110	1 3		TOO'OO

Page Total \$ 1,050.00

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517,10(B)(4)]

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Prescribed by Secretary of State 3/05

57 60 W 1 B 8							
Name of Committee in Full							
Walter4Dublin				W			
Full Name of Contributor				Registra	ation Num	ber, if PA	С
Lekha Shah	T= -						
Street Address	Employe	er/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
6268 Bellow Valley			· · · · · · · · · · · · · · · · · · ·	_			Credit Card
City	St	tate	Zip Code	M	P	Y	Amount
Dublin	O	H	43016	0 7		1 5	250.00
Full Name of Contributor				Registra	ation Num	ber, if PA	С
Dominique A Brunet							
Street Address	Employe	ег/Оссира	ation/Labor Organization*				Form (Cash, Check, etc.)
6816 Enfield Trace							Credit Card
City	St	tate	Zip Code	М	D	Y	Amount
Dublin	О	H	43017	0 7	2 6	1   5	25.00
Full Name of Contributor				Registra	ation Num	ber, if PA	С
John Hardt				L			
Street Address	Employe	er/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
7070 Gorden Farms Pkwy							Creidt Card
City	St	tate	Zip Code	М	D	Y	Amount
Dublin	0	H	43017	0 7	2 6	1   5	250.00
Full Name of Contributor	•	•		Registra	-	ber, if PA	
Nancy R Gernstetter							
Street Address	Employe	ег/Оссира	ation/Labor Organization*				Form (Cash, Check, etc.)
4689 Donegal Cliffs Dr	1						Credit Card
City	St	tate	Zip Code	М	D	Y	Amount
Dublin	0	H	43017	0 7	2 7	1   5	50.00
Full Name of Contributor				-		ber, if PA	
Kelly Ackert							
Street Address	Employe	er/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
8597 Finlarig Drive		-	•				Credit Card
City	St	tate	Zip Code	М	D	Y	Amount
Dublin		l H	43017	0   7	1 .		50.00
Full Name of Contributor			10017			ber, if PA	
Betty Blumenauer				ŭ		,	
Street Address	Employe	ег/Оссира	ation/Labor Organization*	ч—			Form (Cash, Check, etc.)
6004 Kirkwall Ct.		•	v				Check
City	Sı	tate	Zip Code	Тм	D	Y	Amount
Dublin		H	43017	1		1 5	
Full Name of Contributor		1	45017			ber, if PA	
Tim Spencer				1.00		,	
Street Address	Employe	er/Occum	ation/Labor Organization*				Form (Cash, Check, etc.)
8094 Holyrood Court	p.o,	o., o coup.	organismon				Credit Card
City	-	tate	Zip Code	М	D	Y	Amount
Dublin	0	H	43017	0 7	1 .	1 5	75.00
Full Name of Contributor	O	1	43017			ber, if PA	
David Grimm				registr	merous Haril	iou, II I'M	
Street Address	Employ	ar/Occur-	ation/Labor Organization*	1			Form (Cash, Check, etc.)
8148 Grafton End	Lampioye	occupi	MONTOROUS OTRAINEAUUII				
8148 Grafton End City	6	tate	Zip Code	М	D	ΙΥ	Credit Card
•	1 _	iate   H	l -	1 .	1 .		
Dublin	<u>i O</u>		43016	1 0	1 8	1 5	100.00

Page Total \$	820.00
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<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Page	3	
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Prescribed by Secretary of State 3/05

DT 00 20 1 F F						
Name of Committee in Full						
Walter4Dublin						
Full Name of Contributor			Registra	ation Num	ber, if PA	.C
Thomas Hickey						
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)
8692 Tartan Fields Dr.						Credit Card
City	State	Zip Code	M	D	Y	Amount
Dublin	OH	43017	0 7	3 0	1 5	50.00
Full Name of Contributor			Registra	ation Num	ber, if PA	C
Rich Taylor						
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)
4500 Belair Ave						Check
City	State	Zip Code	M	D	Y	Amount
Dublin	O   H	43017	0 7	3 0	1 5	250.00
Full Name of Contributor			Registra	tion Num	ber, if PA	С
Jill Thomas						
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Check, etc.)
3173 Martin Road						Credit Card
City	State	Zip Code	М	D	Y	Amount
Dublin	OH	43017	0 7	3 1	1   5	25.00
Full Name of Contributor				tion Num		
Jodi Rhodes			1			
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)
6475 Green Stone Loop						Credit Card
City	State	Zip Code	М	D	Y	Amount
Dublin	OIH	43016	017	3 1	1   5	50.00
Full Name of Contributor				tion Num	_	
Paul Swift			1			
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)
6181 Memorial Dr	ľ	_				Credit Card
City	State	Zip Code	М	D	Y	Amount
Dublin	$O \mid H$	43017	0 8		1   5	100.00
Full Name of Contributor		10017		tion Num		
Robert Boich					,	-
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)
7590 Bellaire Ave	' ' '					Credit Card
City	State	Zip Code	М	D	Y	Amount
Dublin	ОТН	43017		0     4		
Full Name of Contributor		10017		tion Num		
Julie Stoddard Smith			r.cog.our	idon i vali	, n 111	
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)
6258 Memorial Drive		William David Organization				Credit Card
City	State	Zip Code	М	D	Y	Amount
Dublin	O   H	43017	1 .	I .		
Full Name of Contributor	0 11	43017		0 9	1 5	50.00
David Grimm			registra	mion Ismil	κι, II PA	C
Street Address	Employee/Occur	pation/Labor Organization*				Form (Cook Charles
8148 Grafton End	Employer/Occup	anon ranor Organization*				Form (Cash, Check, etc.)
City	S4-4-	Zip Code	134	Г	Ţ,	Credit Card
	State	1 -	M	D	Y	Amount
Dublin	O H	43016	$1 \mid 0$	1 8	1 5	100.00

Page Total \$	775.00

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Page	4	
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Prescribed by Secretary of State 3/05

Name of Committee in Full	- 410			S49			
Name of Committee in Full							
Walter4Dublin							
Full Name of Contributor			Registra	ation Num	ber, if PA	C	
William Bownas							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
7365 Bellaire Ave						Check	
City	State	Zip Code	М	D	Y	Amount	
Dublin	O   H	43017	0 8	1 3	1   5	1	200.00
Full Name of Contributor		•		ation Num		C	
Brendan Kelly							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
111 W 1st Ave, Apt 12						Credit (	
City	State	Zip Code	М	D	Y	Amount	cara
Columbus	$O \mid H$	43201	0 8	1 .	1   5		25.00
Full Name of Contributor		10201		ation Num			25.00
Daniel Walter			Rogisus	ation iveni	ioci, ii i A		
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cook Ch	
738 Decker Road	Isinpioyes/Occu	pation/Labor Organization				Form (Cash, Ch	
City	94-4-	7:- 0-1-	1 1/	T 5	T +2	Credit (	Lard
' _	State	Zip Code	M	D	Y	Amount	
Georgia	V T	05468	0 8		1 5		50.00
Full Name of Contributor			Registra	ation Num	ber, if PA	.C	
Michelle Thomas							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
6321 Ross Bend						Check	
City	State	Zip Code	М	D	Y	Amount	
Dublin	OH	43016	0 8	2 8	1 5		150.00
Full Name of Contributor			Registra	ation Num	ber, if PA	C	
Cap Clegg							
Street Address	Employer/Occu	pation/Labor Organization*	-			Form (Cash, Ch	eck, etc.)
5334 McGinty Ct						Check	•
City	State	Zip Code	М	D	Y	Amount	
Dublin	OIH	43017	0 9	0 9	1 5		100.00
Full Name of Contributor		1001/		tion Num		C	100.00
Mark Dewalt					<b>,</b>		
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Ch	eck etc.)
8851 Sunart Ct	[,,					Check	oon, oto.)
City	State	Zip Code	М	D	Y	Amount	
Dublin	OIH	1 -		1			100.00
Full Name of Contributor	0 11	45017		1 1			100.00
Timothy Spencer			Registra	mon iamii	ber, ii PA	.C	
Street Address	F1/0					n (6 i e	
	Employer/Occup	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
8094 Holyrood Ct				,		Check	
City	State	Zip Code	M	D	Y	Amount	
Dublin	OH	43017	0 9	1 1	1 6		50.00
Full Name of Contributor			Registra	ttion Num	ber, if PA	.C	
David Grimm							
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
8148 Grafton End						Credit (	Card
City	State	Zip Code	M	D	Y	Amount	
Dublin	O   H	43016	1 0	1 8	1   5		100.00
	THE STATE OF THE S	The state of the s		-			

Page Total \$	775.00

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Page 5	
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Prescribed by Secretary of State 3/05

Name of Committee in Full							
Walter4Dublin							
Full Name of Contributor			Registrat	tion Num	ber, if PA	<u></u>	
Suhail Zidan			Rogistia	HOII I VIIII	1001, 11 17		
Street Address	Employer/Occur	ation/Labor Organization*				Form (Cash, C	hack atc.)
6296 Ross Bend	ampio, an occup	on organization				Check	nock, cic.)
City	State	Zip Code	М	D	Y	Amount	
Dublin	O   H	43017	0 9	l .	1 5		250.00
Full Name of Contributor		10017		The second second	ber, if PA	C	250.00
Pat Grabill						-	
Street Address	Employer/Occup	ation/Labor Organization*			-	Form (Cash, C	heck, etc.)
2970 Arbuckle Rd NW		_				Credit	-
City	State	Zip Code	M	D	Y	Amount	Curu
London	$O \mid H$	43140	0 9	1   4	1   5		250.00
Full Name of Contributor					ber, if PA	c	200.00
Scott Wood							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, C	heck, etc.)
34 Pepperbush Dr						Credit	Card
City	State	Zip Code	М	D	Y	Amount	
Amston	CT	06231	0 9	2   5	1   5		250.00
Full Name of Contributor			Registrat		ber, if PA	С	
Julie Helmreich			L				
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, C	heck, etc.)
6600 Deeside Dr.						Credit	Card
City	State	Zip Code	M	D	Y	Amount	
Dublin	O H	43017	0 9	2 5	1 5		100.00
Full Name of Contributor			Registrat	ion Num	ber, if PA	С	
David Monte							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, C	heck, etc.)
8880 Lea Ct						Check	
City	State	Zip Code	M	D	Y	Amount	
Dublin	O H	43017	$1 \mid 0$	0 8	1 5		100.00
Full Name of Contributor			Registrat	ion Num	ber, if PA	С	
Donna O'Connor							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, C	heck, etc.)
5065 Winchell Ct						Check	
City	State	Zip Code	M	D		Amount	
Dublin	OH	43017			1 5		100.00
Full Name of Contributor			Registrat	ion Num	ber, if PA	С	
David Gonzalez Street Address	In 1 10					- 6	
	Employer/Occup	ation/Labor Organization*				Form (Cash, C	
8440 Arbory Hill Court	St-4-	z:- 0. t-		-	1 72	Credit	Card
1 ·	State H	Zip Code	M	D	Y	Amount	450.00
Dublin Full Name of Contributor	ОН	43017	1 0	0 8	1 5		150.00
			Kegistrat	ion Num	ber, if PA	L	
David Grimm Street Address	Employee/O	ation/Labor Organization*				Earn (C-1 C	Na-14. \
8148 Grafton End	Employer/Occup	anom Labor Organization*				Form (Cash, C	
6146 Grafton End City	State	Zip Code	14	D	Y	Credit	Cara
Dublin	OH	43016	M	D 10	1	Amount	100.00
equired for contributions from individuals over \$100 to statewing			1 0	1 8	1 5	Cd	100.00

Page Total \$ 1,300.00

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Page 6	
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	Page 6

Prescribed by Secretary of State 3/05

Name of Committee in Full	107	2.7				
Walter4Dublin						
Full Name of Contributor			Dogista	ation Ninn	L :CDA	
Tom Holton			Registr	ation Num	oer, ii PA	ic
Street Address	Employer/Occur	pation/Labor Organization*				E (C-1 (L-1 + 1)
	remployer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
5957 Roundstone Pl City	Cara	7:- 0-1-	1 14	1 5		Check
	State	Zip Code	M	D	Y	Amount
Dublin Full Name of Contributor	ОП	43016	1 0			75.00
rui Name of Contributor			Registr	ation Num	ber, if PA	ac .
Street Address	Employer/Occu	pation/Labor Organization*	<u>L</u>	***		Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
		Zap Codo	"			Allouit
Full Name of Contributor			Registr	ation Num	ber, if PA	C
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
		j		1		l
Full Name of Contributor			Registr	ation Num	ber, if PA	C
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			Registr	ation Num	ber, if PA	C
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor		The state of the s	Registr	ation Num	ber, if PA	C
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
<b></b>			"			Panouit
Full Name of Contributor			Registr	ation Num	ber, if PA	C
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			Registr	ation Num	ber, if PA	C
Street Address	Employer/Occu	pation/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
	400	1 money				

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Page Total \$	75.00

Page	1

# **Statement of Expenditures**

Prescribed by Secretary of State 2/01

Name of Committee in Full				
Walter4Dublin				
To Whom Paid				Amount
Stripe			1 0 0 1 1 5	85.65
Address	Purpose			
3180 18th St	Credit C	ard Processing Fees		
City	State	Zip Code	Check Number	
San Francisco		94110	Stripe Fee	
To Whom Paid			M D Y	Amount
BMI FCU			0 8 1 8 1 5	3.00
Address	Purpose			
6165 Emerald Pkwy	Cahsiers	Check Fee		
City	State	Zip Code	Check Number	
Dublin	$O \mid H$	43016		
To Whom Paid			M D Y	Amount
Dublin Scioto Touchdown Club			0 8 1 8 1 5	400.00
Address	Purpose			
6556 Birchton	Football	Program Advertising	7	
City	State	Zip Code	Check Number	
Dublin	$O \mid H$	43016	244730	
To Whom Paid			M D Y	Amount
GoDaddy			0 4 0 1 1 5	25.36
Address	Purpose		0 1 0 1 1 0	20.00
14455 N Hayden Rd	Domain	Services		
City	State	Zip Code	Check Number	
Scottsdale	$A \mid Z$	85260	PayPal	
To Whom Paid	A	00200	M D Y	Amount
GoDaddy			0   7   2   8   1   5	
Address	Purpose		0 7 2 0 1 3	10.01
14455 N Hayden Rd		Services		
City	State	Zip Code	Check Number	
Scottsdale	$\Delta \mid Z$	85260	PavPal	Mining of Pictor
To Whom Paid	A	00200	M D Y	Amount
GoDaddy			0 7 3 1 1 5	52.68
Address	Purpose		0 7 3 1 1 3	52.00
14455 N Hayden Rd	I -	Services		
City	State	Zip Code	Check Number	
Scottsdale	$\Delta \mid Z$	85260	PayPal	
To Whom Paid	AZ	85200	M D Y	Amount
GoDaddy			0 8 1 0 1 5	
Address	In		0 8 1 0 1 3	13.17
	Purpose	Commisses		
14455 N Hayden Rd City	Domain		Check Number	
	State	Zip Code		
Scottsdale	AZ	85260	PayPal	
To Whom Paid			M D Y	Amount
Jason Marshall	In .		0 7 2 0 1 5	250.00
Address	Purpose	TTantina and A.A.	C	
3574 Whisper Creek Dr	+	Hosting and Admin		
City	State	Zip Code	Check Number	THE RESERVE
Columbus	$O \mid H$	43231	PayPal	

Page Total \$ 842.87	Page Total \$	842.87
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# **Statement of Expenditures**

Prescribed by Secretary of State 2/01

Name of Committee in Full			· · · · · · · · · · · · · · · · · · ·	
Walter4Dublin				
To Whom Paid			W D V	Amino
Constant Contact			M D Y 0 7 2 8 1 5	Amount
Address	In	* ** · · · · · · · · · · · · · · · · ·	0 7 2 8 1 5	81.13
	Purpose	Nami atia		
1601 Trapelo Rd		Marketing	Tot 137 1	
City	State	Zip Code	Check Number	
Waltham	M A	02451	PayPal	المناحب المالي
To Whom Paid			M D Y	Amount
Integrated Marketing Solutions	T		1 0 1 4 1 5	3,228.73
Address	Purpose	0.11 . 13.5 .		
55 S High St		ign Collateral Mate		
City	State	Zip Code	Check Number	
Dublin	OH	43017	247515	1967
To Whom Paid			M D Y	Amount
BMI FCU			1 0 1 4 1 5	3.00
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6165 Emerald Parkway	Cashier	s Check Fee		
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Stripe			1 0 1 5 1 5	12.20
Address	Purpose			
3180 18th St	Credit (	Card Processing Fee	es	
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San Francisco	$C \mid A$	94110	Stripe Fee	
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